MAINE DEPARTMENT OF INLAND FISHERIES AND WILDLIFE

284 State Street, 41 SHS Augusta, ME 04333 Phone 207-287-8000 / Fax 207-287-8094

Whitewater Guide License Application

In accordance with the provisions of the Revised Statutes, Title 12, Section 12909.

IN	ew Application a	and Applicatio	on Fee (1779): \$100.0		_ 3-Year New	Applicant Licen	se ree: \$89.00	
3	-Year Renewal Li	icense Fee \$8	9.00		Level I Rene	ewalL	₋evel II Renewal	
Make Ch	ecks payable to Ti	reasure State o	f Maine					
Name:							_DOB:	
Mailing	Addross	First	Last		MI			
iviaiiiig	Address	Street	or Box #	City or Town		State	Zip Code	
Physica	l Address:							
Thysical Address.		Street or Road		City or Town		State	•	
Physical Description: _		Height Eye Color		Weight	Driver's License #:		e #:	
		неідпі	Eye Color	weight	Sex			
Email A	ddress:				F	Phone Number	:	
Moses ID:		Last Year Licensed:		S	Social Security or Federal ID #:New Applicants Only			
WIOSCS		Last rear Electised						
	Have you been	of the documon convicted o		a license in this	state or anot	ther state or pi	for the renewal. (D) Sign rovince?	
Α.	statement mad whitewater guid	statements n e in this appli de's license, a	nade hereon, and any cation or in any docu nd possible criminal	ments provided r prosecution.	may result in c	lenial, suspensio	Understand that any false on or revocation of your	
Signatur	e:		Renewal Applicant C			Date:		
			nenewai Applicant C	,,,,,				

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New Applicant Whitewater Guide License Application

NEW APPLICANTS: (A) Complete both sides of this document. (B) Answer questions 1-3. (C) Submit proof of current C.P.R. and first aid certification, in American Red Cross, National Safety Council standard first aid and C.P.R. or equivalent. (D) Submit a Whitewater Guide Training Log. (E) Non-refundable \$100.00 application fee. (F) Sign and date at the bottom of the document.

	New Applicant O	Only		
Signat	ture:		Date:	
A.	I Certify that all statements made hereon, and a any false statement made in this application or revocation of your whitewater guide's license, a	in any document	s provided may result in denial, suspe	
Asses The p	RMATION REQUIRED: Under MRSA Title 36, sections or, a list of all licenses and permits issued annual ermit or license information must include the name identifying information of the licensee.	lly, that give auth	ority to conduct a profession, trade or	business.
LEVEL Augus	. II UPGRADE: Applicants must complete and subn sta.	nit a Whitewater	Guide Training Log, to the Licensing Di	ivision in
applic payab Applic Friday	cation fee of \$100.00, and a separate check for you ple to Treasure State of Maine. Applicants paying cants paying by credit card, must contact the Departure of the example of the example of the written exam process, you will be a separate check for your will be a separate	ur 3-year license i with cash at the c artment's Licensin being administe	ee of \$89.00. Applicants must make clate of the exam, must have exact chang Division, at 207-287-8000, Monday red. If, due to a disability, you need an	hecks nge. through Y
NEW	APPLICANTS: If you are applying and taking the w	ritten exam the s	ame day, you must submit a check for	the
	How many years were you licensed as a Whitev	water Guide?	Last year licensed?	
3.	Have you been previously licensed as a Whitew	vater Guide?	State?	

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